

## APPLICATION FOR RECORDS RETENTION SCHEDULE

GEORGIA DEPARTMENT OF HUMAN RESOURCES  
OFFICE OF ADMINISTRATIVE SERVICES  
RECORDS MANAGEMENT UNIT

For instructions on completing this form contact DHR Records Management Unit, 47 Trinity Avenue, Atlanta, Georgia 30334. Phone - (404) 656-4976 GIST: 221-4983

DHR		1. GEORGIA DEPARTMENT OF HUMAN RESOURCES		ARCHIVES AND HISTORY	
Application Date		Division of Family and Children Services		Application Number	
5/10/83		Administration and Management Section		83-855	
Application Number		Program Evaluation Analysis and Reporting Unit		Date Received	
83-10		Unit 618 Ponce De Leon Ave. NE		MAY 13 1983	
		Atlanta, Ga.		Date Completed	
				JUN 29 1983	
2. Person to Contact		Working Title		Telephone Number	
Betty Long		Program Analyst		894-4456	
3. Action Requested					
a. <input checked="" type="checkbox"/> Establish Retention Schedule; record will continue to accumulate.					
b. <input type="checkbox"/> Dispose of present accumulation; no further accumulation anticipated.					
c. <input type="checkbox"/> Amend Application No. _____ Check One: <input type="checkbox"/> Change; <input type="checkbox"/> Supersede; <input type="checkbox"/> Void					
4. Dates of Series		5. Records Series Title (followed by title used in office; if different)			
Earliest					
Latest					
FY80		DFCS Self Assessment Document (Total County Review)			
FY82					
6. Division and Office Function - What is the function of the Division and the Office in which this record series is created?					
<p>The Division of Family and Children Services, through the leadership of the Director, is responsible for administering, supervising, and regulating services to indigent children, adults, and families, State-wide; for serving as liaison with the Regional Office of HHS concerning the status of the State Social Service Plan and for clearing policy questions; and for working with other DHR Offices and Divisions to resolve problems affecting the operation of the Division of Family and Children Services.</p> <p>The Program Evaluation Analysis and Reporting Unit is responsible for analyzing congressional legislation, Federal regulations, instructions and court orders pertaining to the Food Stamp Program; for interpreting food stamp policies and procedures for State and local DHR staff; assuring uniform and consistent policy interpretation with other unit personnel (Legal Services, Quality Control, and Fair Hearing Officers) relating to the Program; updating the State Plan Operation as required by the United States (See Continuation Page)</p>					
7. Records Series Description This file contains the following documents (include form numbers and titles, if any): Attach samples of the file.					
Documents relating to: recording and analyzing county DFCS offices performance and effectiveness					
Included are: Self Assessment Document, for each of 159 county DFCS offices; and Corrective Action Plan, for each of 19 Districts.					
File is arranged: Alphabetically by county and numerically by district					
8. Monthly Reference Rate How often are records referred to which are:					
One to six months old <u>Daily</u> ; Seven to twelve months old <u>8</u> ; Thirteen to twenty-four months old <u>2</u> ;					
twenty-five months and older <u>0</u> ?					
9. Annual Rate of Accumulation or Records					
Letter-size drawers <u>13</u> <u>Every other year</u> ; Legal-size drawers _____ ; Shelves _____ ; Other (Specify) _____					

YES	NO	10. Questionnaire (Place an "X" in the proper column)
X		a. Is this the official copy of the series? If not, where is it?
	X	b. Does the series contain confidential information requiring security handling? If yes, cite law or regulation.
	X	c. Is this a vital record?
	X	d. Does this series have historical or long term research value?
X		e. When one or two documents in the file make it necessary to keep the entire file for a long period, could these documents be scheduled separately?
X		f. Is the information contained in this series ever published? If yes, attach copy.
X		g. Is the information contained in this series ever analyzed and/or recorded in a summarized report? If yes, attach copy. <b>Scheduled under #73-5 DFCS Annual Report File</b>
X		h. Is there a duplication of this series in your office, or in another office or agency? If yes, where?
	X	i. Is this series (or a major portion of it) regularly microfilmed?
X		j. Does the record series result in a computer printout? <b>Only selected information results in printout</b>

#### 11. Retention Requirements

The following requires the series to be kept:

- |                          |              |                                   |                 |
|--------------------------|--------------|-----------------------------------|-----------------|
| a. State Law             | _____ years. | d. Audit period                   | _____ years.    |
| b. Statute of limitation | _____ years. | e. Administrative need            | <u>5</u> years. |
| c. Federal law           | _____ years. | f. Federal retention instructions | _____ years.    |

Attach copy or excerpt of laws or regulations. Explain administrative need.

Administratively, these files are needed to document self assesment of county DFCS offices and district's corrective action plan. **Used for budget planning under Department's 5-year budget planning system.**

12. Approved Disposition Instructions		This agency recommends that the file series be cut off at the end of each:
<input type="checkbox"/>	Calendar Year	<input checked="" type="checkbox"/> Fiscal Year; <input type="checkbox"/> Other _____ then,
<input checked="" type="checkbox"/>	Hold in the current files area	_____ month(s) <u>2</u> year(s); then
<input type="checkbox"/>	Transfer to local holding area; hold	_____ year(s); then
<input checked="" type="checkbox"/>	Transfer to State Records Center; hold	<u>3</u> year(s); then
<input checked="" type="checkbox"/>	Destroy	<b>EXCEPT THAT: Beginning with records for FY80 and every 4th year thereafter;</b>
<input type="checkbox"/>	Transfer to State Archives for permanent retention;	then transfer series to Archives for continuing retention.
<input type="checkbox"/>	Other (Specify)	_____

These instructions apply to all prior and future accumulations of the series.

Agency Head/Designee (Signature)	Date	Records Management Officer (Signature)	Date
	<u>5/10/83</u>	<u>Paul V. Murphy</u>	<u>5/9/83</u>
Recommendations in paragraph 12 are approved. (If disapproved, attach letter of explanation.)		State Records Committee (Signature)	Date
		<u>Edward Weiden</u>	<u>6/24/83</u>
		<u>Edward Weiden</u>	<u>6/20/83</u>
		<u>Edward Weiden</u>	